

CANDIDATE'S REPORT

(to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate

RENEE GILL PRATT
1718 TOLEDANO ST.
New Orleans LA
70115

2. Office Sought (include title of office as well as parish, city, town and/or election district)

**House of
 Representatives**
DISTRICT 91

OFFICE USE ONLY

10.P 10/99

10/13

3. Date of Primary 10/23/99

This report covers from 9/14/99 through 10/13/99

4. Type of Report:

- 180th day prior to primary 40th day after general
 90th day prior to primary Annual (future election)
 30th day prior to primary Supplemental (past election)
 10th day prior to primary
 10th day prior to general Amendment to prior report

5. FINAL REPORT IF:

- Withdrawn Filed after the election AND all loans and debts paid
 Unopposed

1999 OCT 14 PH 2:37
 ETHICS ADMINISTRATION
 CAMPAIGN FINANCE
 RECEIVED

6. Name and Address of Financial Institution
 (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)

LIBERTY BANK
3001 CANAL ST
New Orleans LA 70119

7. Full Name and Address of Treasurer

JACK SWETLAND
650 PUYARRA ST #2245
NEW ORLEANS LA 70130

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY

a. Name and address of principal campaign committee

9. Name of Person Preparing Report

JACK SWETLAND

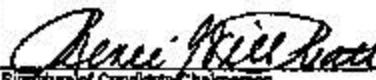
Daytime Telephone

524-8311

b. Name and address of committee's chairperson

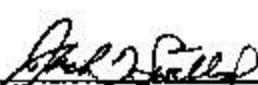
10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 13th day of October, 1999


 Signature of Candidate/Chairperson
 (To be signed by Chairperson only if report by
 principal campaign committee)

896 1307
 Daytime Telephone

c. Name and address of all subsidiary committees, if any
 (Use additional sheets if necessary)


 Signature of Treasurer
 Form 102, Rev. 1/98, Page Rev. 1/98

524-8311
 Daytime Telephone